

Recipient Committee Campaign Statement

(Government Code Sections 84200-84216.5)

Type or print in ink.

Date Stamp

CALIFORNIA
2001/02
FORM

COVER PAGE
460

Page 1 of 70

For Official Use Only

Statement covers period

from 05/23/2010

through 06/05/2010

Date of election if applicable:

(Month, Day, Year)

06/22/2010

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1,2,3, and 4.

- ☐ Officeholder, Candidate Controlled Committee
☐ State Candidate Election Committee
☐ Recall

(Also Complete Part 5.)

- ☒ General Purpose Committee
☐ Sponsored
☐ Small Contributor Committee
☒ Political Party/Central Committee

- ☐ Ballot Measure Committee
☐ Primary Formed
☐ Controlled
☐ Sponsored

(Also Complete Part 6.)

- ☐ Primary Formed Candidate/
Officeholder Committee
(Also Complete Part 7.)

2. Type of Statement:

- ☒ Pre-election Statement
☐ Semi-annual Statement
☐ Termination Statement
☒ Amendment (Explain below)

Schedule E and cash balance corrections

- ☐ Quarterly Statement
☐ Special Odd-Year Report
☐ Supplemental Preelection
Statement - Attach Form 495

3. Committee Information

I.D. NUMBER
741906

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
San Diego County Democratic Party (State Acct.)

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>San Diego</u>	<u>CA</u>	<u>92111-1320</u>	

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX/E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER
Xavier R Martinez

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>San Marcos</u>	<u>CA</u>	<u>92078-5095</u>	<u>(760) 752-1610</u>

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX/E-MAIL ADDRESS
(760) 752-9530 / info@sddemocrats.org

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 07/23/2010 By Xavier Martinez
DATE SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on _____ By _____
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR

Executed on _____ By _____
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Executed on _____ By _____
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC
State of California

Recipient Committee
Campaign Statement
Cover Page – Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA
FORM **460**

Page 2 of 70

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

N/A N/A

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

N/A CA 00000

Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME

I.D.NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME

I.D.NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

6. Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER

JURISDICTION

☐ SUPPORT
☐ OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD

DISTRICT NO. IF ANY

7. Primarily Formed Committee

List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

Type or print in ink.
Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from 05/23/2010 through 06/05/2010	CALIFORNIA FORM 460 Page 3 of 70 I.D. NUMBER 741906
--	--

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

San Diego County Democratic Party (State Acct.)

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	\$39,259.00	\$188,119.00
2. Loans Received	Schedule B, Line 7	\$0.00	\$0.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	\$39,259.00	\$188,119.00
4. Nonmonetary Contributions	Schedule C, Line 3	\$0.00	\$5,464.38
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	\$39,259.00	\$193,583.38

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contribution Received	\$0.00	\$0.00
21. Expenditures Made	\$0.00	\$0.00

Expenditures Made

6. Payments Made	Schedule E, Line 4	\$54,715.47	\$142,897.99
7. Loans Made	Schedule H, Line 7	\$0.00	\$0.00
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	\$54,715.47	\$142,897.99
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	\$0.00	\$0.00
10. Nonmonetary Adjustment	Schedule C, Line 3	\$0.00	\$5,464.38
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	\$54,715.47	\$148,362.37

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	\$72,652.69	To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).
13. Cash Receipts	Column A, Line 3 above	\$39,259.00	
14. Miscellaneous Increases to Cash	Schedule I, Line 4	\$0.00	
15. Cash Payments	Column A, Line 8 above	\$54,715.47	
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15	\$57,196.22	
If this is a termination statement, Line 16 must be zero.			
17. LOAN GUARANTEES RECEIVED	Schedule B, Part 2	\$0.00	

Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See instructions on reverse	\$0.00
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above	\$0.00

*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

Schedule A

Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
from	05/23/2010	
through	06/05/2010	Page 4 of 70
NAME OF FILER San Diego County Democratic Party (State Acct.)		I.D. Number 741906

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
6/4/2010	Advance America Spartanburg, SC 29306-5138	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	
6/3/2010	District Council Of Iron Workers Pinole, CA 94564-2072 Committee ID: 830683	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$999.00	\$999.00	
6/2/2010	Plumbers & Steamfitters Local Union 230 PAC San Diego, CA 92121-2247 Committee ID: 891894	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,500.00	\$7,500.00	
5/30/2010	San Diego-Imperial Counties Central Labor Council San Diego, CA 92108-4005 Committee ID: 744131	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$25,000.00	\$95,000.00	
5/24/2010	SDFF Local 145 Political Fund San Diego, CA 92108-2174 Committee ID: 761453	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000.00	\$17,000.00	

SUBTOTAL

Schedule A Summary

1. Amount received this period - contributions of \$100 or more. (Include all Schedule A subtotals.)	\$39,199.00
2. Amount received this period - unitemized contributions of less than \$100	\$60.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)	TOTAL \$39,259.00

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

FPPC Form 460 (JUNE/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	05/23/2010	
through	06/05/2010	Page 5 of 70

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

San Diego County Democratic Party (State Acct.)

I.D. Number
741906

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
6/5/2010	Southern California Pipe Trades Los Angeles, CA 90020-1748 Committee ID: 760715	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,500.00	\$7,500.00	
6/2/2010	Sunroad Asset Management, Inc. (02) San Diego, CA 92121-1979	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$2,000.00	
5/24/2010	Michael D Gelfand Rancho Santa Fe, CA 92067	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Terra Vista Management Real Estate Investment Mgmt	\$500.00	\$500.00	
	INTERMEDIARY ActBlue California Cambridge, MA 02138-5106	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
5/28/2010	Lawrence E Hess San Diego, CA 92120-3816	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Lehbros Limited Real Estate	\$1,000.00	\$1,000.00	
SUBTOTAL						

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	05/23/2010	
through	06/05/2010	Page 6 of 70
NAME OF FILER San Diego County Democratic Party (State Acct.)		I.D. Number 741906

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/24/2010	Jay Jeffcoat San Diego, CA 92128-1032	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	DLA Piper Attorney	\$200.00	\$200.00	
	INTERMEDIARY ActBlue California Cambridge, MA 02138-5106	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL				\$39,199.00		

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule B – Part 1 Loans Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 1

Statement covers period
from 05/23/2010
through 06/05/2010

CALIFORNIA
FORM **460**

Page 7 of 70

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		_____% RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		_____% RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		_____% RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	

SUBTOTALS

Schedule B Summary

1. Loans received this period. _____
(Total Column (b) plus unitemized loans less than \$100.)

2. Loans paid or forgiven this period _____
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (Subtract Line 2 from Line 1.) _____ **Net** _____
Enter the net here and on the Summary Page, Column A, Line 2. (may be a negative number)

(Enter (e) on
Schedule E, Line 3)

* Amounts forgiven or paid by
another party also must be
reported on Schedule A.

** If required.

*Contributor Codes

IND-Individual COM-Recipient Committee (other than PTY or SCC) OTH-Other PTY-Political Party SCC-Small Contributor Committee

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule B - Part 2

Loan Guarantors

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 2

Statement covers period from 05/23/2010 through 06/05/2010	CALIFORNIA FORM 460
	Page 8 of 70
I.D. Number 741906	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER DATE		CALENDAR YEAR PER ELECTION (IF REQUIRED)	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER DATE		CALENDAR YEAR PER ELECTION (IF REQUIRED)	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER DATE		CALENDAR YEAR PER ELECTION (IF REQUIRED)	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER DATE		CALENDAR YEAR PER ELECTION (IF REQUIRED)	
SUBTOTAL					Enter on Summary Page, Line 17 only.	

Schedule C

Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from <u>05/23/2010</u> through <u>06/05/2010</u>	CALIFORNIA FORM 460
	Page <u>9</u> of <u>70</u>
I.D. Number 741906	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL

Schedule C Summary

- Amount received this period - nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.).....
- Amount received this period - unitemized nonmonetary contributions of less than \$100
- Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

*Contributor Codes
 IND - Individual
 COM- Recipient Committee
 (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule D

Summary of Expenditures

Supporting/Opposing Other

Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460	
from	05/23/2010		
through	06/05/2010		
		Page 10	of 70
		I.D. NUMBER 741906	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/25/2010	Payee Name: Cameron Brown Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	canvassing for local candidate (Funds Spent from Federal Account) to support Humberto Peraza	\$60.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/25/2010	Payee Name: Anthony G Chavarria Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	canvassing for local candidate (Funds Spent from Federal Account) to support Humberto Peraza	\$60.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/25/2010	Payee Name: George Tellez Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	canvassing for local candidate (Funds Spent from Federal Account) to support Humberto Peraza	\$60.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D Summary

- Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.) \$73,049.13
- Unitemized contributions and independent expenditures made this period of under \$100 \$38.33
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) **TOTAL** \$73,087.46

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 05/23/2010		
through 06/05/2010		Page 11 of 70
NAME OF FILER San Diego County Democratic Party (State Acct.)		I.D. NUMBER 741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/25/2010	Payee Name: Christopher R Chavarria Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	canvassing-local candidate (Funds Spent from Federal Account) to support Humberto Peraza	\$120.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/25/2010	Payee Name: Celine Rodriguez Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	canvassing for local candidate (Funds Spent from Federal Account) to support Humberto Peraza	\$60.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/25/2010	Payee Name: Graciela Rivas Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	canvassing for local candidate (Funds Spent from Federal Account) to support Humberto Peraza	\$60.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/25/2010	Payee Name: Denise Mejia Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	canvassing for local candidate (Funds Spent from Federal Account) to support Humberto Peraza	\$60.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 05/23/2010

through 06/05/2010

CALIFORNIA
FORM 460

Page 12 of 70

NAME OF FILER
 San Diego County Democratic Party (State Acct.)

I.D. NUMBER
 741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/25/2010	Payee Name: Timothy J Buzbee Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	canvassing for local candiate (Funds Spent from Federal Account) to support Humberto Peraza	\$120.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/25/2010	Payee Name: Fahari Jeffers Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	canvassing for local candidate (Funds Spent from Federal Account) to support Humberto Peraza	\$300.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/25/2010	Payee Name: Billie B Johnson Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	cavassing for local candidate (Funds Spent from Federal Account) to support Humberto Peraza	\$240.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/25/2010	Payee Name: Kyle M Cohen Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	canvassing for local candidate (Funds Spent from Federal Account) to support Humberto Peraza	\$300.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 05/23/2010

through 06/05/2010

CALIFORNIA
FORM 460

Page 13 of 70

NAME OF FILER
 San Diego County Democratic Party (State Acct.)

I.D. NUMBER
 741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/25/2010	Payee Name: Will Copy & Print Candidate Name: Toni Atkins State Senator District 76 Jurisdiction: Senate	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-printing slate door hanger (Funds Spent from Federal Account) to support Toni G Atkins	\$234.02	\$347.47	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/25/2010	Payee Name: Will Copy & Print Candidate Name: Hon. Howard Wayne City Council Member District 6 Jurisdiction: City of San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-printing slate door hanger (Funds Spent from Federal Account) to support Hon. Howard Wayne	\$234.02	\$29,093.89	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/25/2010	Payee Name: Will Copy & Print Candidate Name: Stephen Whitburn County Supervisor District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-printing slate door hanger (Funds Spent from Federal Account) to support Stephen L Whitburn	\$292.53	\$2,042.97	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/25/2010	Payee Name: Will Copy & Print Candidate Name: Hon. Sheila Jackson Board of Supervisors District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-printing slate door hanger (Funds Spent from Federal Account) to support Hon. Sheila L Jackson	\$292.53	\$2,042.97	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 05/23/2010

through 06/05/2010

CALIFORNIA
FORM 460

Page 14 of 70

NAME OF FILER
 San Diego County Democratic Party (State Acct.)

I.D. NUMBER
 741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/25/2010	Payee Name: Will Copy & Print Candidate Name: Juan Del Rio Board of Supervisors District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	MBR_printing slate door hanger (Funds Spent from Federal Account) to support Juan M Del Rio	\$292.53	\$2,042.97	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/25/2010	Payee Name: Will Copy & Print Candidate Name: Margaret Moody County Supervisor District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-printing slate door hanger (Funds Spent from Federal Account) to support Margaret A Moody	\$292.53	\$2,042.97	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/25/2010	Payee Name: Will Copy & Print Candidate Name: Ron Roberts County Supervisor District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-printing slate door hanger (Funds Spent from Federal Account) to oppose Ron Roberts	\$87.76	\$25,395.99	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
5/25/2010	Will Copy & Print Proposed Term Limits Ballot Number or Letter: B Jurisdiction: B	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-printing slate door hanger (Funds Spent from Federal Account) to support Proposed Term Limits	\$204.77	\$874.61	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 05/23/2010

through 06/05/2010

CALIFORNIA
FORM 460

Page 15 of 70

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/28/2010	Payee Name: Kelly Paper Candidate Name: Patrick Finucane City Council Member District 2 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	MBR paper for mailer-no Feder (Funds Spent from Federal Account) to support Patrick Finucane	\$255.00	\$1,129.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Payee Name: Will Copy & Print Candidate Name: Ron Roberts County Supervisor District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-MBR-printing mail piece to oppose Ron Roberts	\$3,071.00	\$25,395.99	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
5/28/2010	Payee Name: Will Copy & Print Candidate Name: Stephen Whitburn County Supervisor District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-print postcard mailers all (Funds Spent from Federal Account) to support Stephen L Whitburn	\$419.90	\$2,042.97	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Payee Name: Will Copy & Print Candidate Name: Hon. Sheila Jackson Board of Supervisors District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-print post card mailer all (Funds Spent from Federal Account) to support Hon. Sheila L Jackson	\$419.90	\$2,042.97	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 05/23/2010

through 06/05/2010

CALIFORNIA
FORM 460

Page 16 of 70

NAME OF FILER
 San Diego County Democratic Party (State Acct.)

I.D. NUMBER
 741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/28/2010	Payee Name: Will Copy & Print Candidate Name: Juan Del Rio Board of Supervisors District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	MBR -print post card mailer al (Funds Spent from Federal Account) to support Juan M Del Rio	\$419.90	\$2,042.97	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Payee Name: Will Copy & Print Candidate Name: Margaret Moody County Supervisor District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-print post card mailer all (Funds Spent from Federal Account) to support Margaret A Moody	\$419.90	\$2,042.97	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Payee Name: Will Copy & Print Candidate Name: Ron Roberts County Supervisor District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-print post card mailer al (Funds Spent from Federal Account) to oppose Ron Roberts	\$1,809.63	\$25,395.99	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
5/28/2010	Will Copy & Print Proposed Term Limits Ballot Number or Letter: B Jurisdiction: B	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR -print post card mailer al (Funds Spent from Federal Account) to support Proposed Term Limits	\$122.81	\$874.61	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 05/23/2010		
through 06/05/2010		Page 17 of 70

NAME OF FILER
 San Diego County Democratic Party (State Acct.)

I.D. NUMBER
 741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/28/2010	Payee Name: Eye/Comm, Inc. Candidate Name: Ron Roberts County Supervisor District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-mailing service-no Federal (Funds Spent from Federal Account) to oppose Ron Roberts	\$3,972.37	\$25,395.99	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
5/29/2010	Payee Name: Tony Turpin Associates Candidate Name: Steve Castaneda Mayor Jurisdiction: City of Chula Vista	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-printing/mail service for mail to support Steve Castaneda	\$4,391.32	\$25,538.14	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/1/2010	Payee Name: Post Haste Mailing Services, Inc. Candidate Name: Hon. Howard Wayne City Council Member District 6 Jurisdiction: City of San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-Mail service & postage for mai to support Hon. Howard Wayne	\$2,585.00	\$29,093.89	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Payee Name: Joan Guelden Candidate Name: Ron Roberts County Supervisor District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-Design mailer to oppose Ron Roberts	\$675.00	\$25,395.99	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 05/23/2010		
through 06/05/2010		Page 18 of 70
NAME OF FILER San Diego County Democratic Party (State Acct.)		I.D. NUMBER 741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/28/2010	Payee Name: Joan Guelden Candidate Name: Ron Roberts County Supervisor District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-Design mailer & doorhanger (Funds Spent from Federal Account) to oppose Ron Roberts	\$318.13	\$25,395.99	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
6/1/2010	Payee Name: Eye/Comm, Inc. Candidate Name: Stephen Whitburn County Supervisor District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-mail service for mailer al (Funds Spent from Federal Account) to support Stephen L Whitburn	\$297.32	\$2,042.97	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/1/2010	Payee Name: Cameron Brown Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Canvassing for local candidate (Funds Spent from Federal Account) to support Humberto Peraza	\$300.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/1/2010	Payee Name: Timothy J Buzbee Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR:canvassing for local candi (Funds Spent from Federal Account) to support Humberto Peraza	\$60.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 05/23/2010

through 06/05/2010

CALIFORNIA
FORM 460

Page 19 of 70

NAME OF FILER
 San Diego County Democratic Party (State Acct.)

I.D. NUMBER
 741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
6/1/2010	Payee Name: Christopher R Chavarria Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	canvassing for local candidate (Funds Spent from Federal Account) to support Humberto Peraza	\$300.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/1/2010	Payee Name: Christopher Dahringer Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	canvassing for local candidate (Funds Spent from Federal Account) to support Humberto Peraza	\$120.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/1/2010	Payee Name: Fahari Jeffers Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR:canvassing for local candi (Funds Spent from Federal Account) to support Humberto Peraza	\$300.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/1/2010	Payee Name: Billie B Johnson Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-canvassing for local candi (Funds Spent from Federal Account) to support Humberto Peraza	\$60.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>05/23/2010</u>		
through <u>06/05/2010</u>		Page <u>20</u> of <u>70</u>

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
6/1/2010	Payee Name: Denise Mejia Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	MBR: canvassing for local cand (Funds Spent from Federal Account) to support Humberto Peraza	\$60.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/1/2010	Payee Name: Jessica Nunez Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-canvassing for local candi (Funds Spent from Federal Account) to support Humberto Peraza	\$180.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/1/2010	Payee Name: Rueben Reyes Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-canvassing for local candi (Funds Spent from Federal Account) to support Humberto Peraza	\$120.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/1/2010	Payee Name: Celine Rodriguez Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	mbr-Canvassing for local candi (Funds Spent from Federal Account) to support Humberto Peraza	\$180.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	05/23/2010	
through	06/05/2010	Page <u>21</u> of <u>70</u>

NAME OF FILER
 San Diego County Democratic Party (State Acct.)

I.D. NUMBER
 741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
6/1/2010	Payee Name: George Tellez Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-canvassing for local candi (Funds Spent from Federal Account) to support Humberto Peraza	\$180.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/1/2010	Payee Name: Anne W Kearns Candidate Name: Hon. Howard Wayne City Council Member District 6 Jurisdiction: City of San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-Design postcard mailer to support Hon. Howard Wayne	\$500.00	\$29,093.89	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Payee Name: Joan Guelden Candidate Name: Stephen Whitburn County Supervisor District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$73.82	\$2,042.97	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Payee Name: Joan Guelden Candidate Name: Hon. Sheila Jackson Board of Supervisors District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-design/layour postcard mai (Funds Spent from Federal Account) to support Hon. Sheila L Jackson	\$73.82	\$2,042.97	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 05/23/2010

through 06/05/2010

CALIFORNIA
FORM 460

Page 22 of 70

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/28/2010	Payee Name: Joan Guelden Candidate Name: Juan Del Rio Board of Supervisors District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-design/layout postcard mai (Funds Spent from Federal Account) to support Juan M Del Rio	\$73.82	\$2,042.97	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Payee Name: Joan Guelden Candidate Name: Margaret Moody County Supervisor District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-design/layout postcard mai (Funds Spent from Federal Account) to support Margaret A Moody	\$73.82	\$2,042.97	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Joan Guelden Proposed Term Limits Ballot Number or Letter: B Jurisdiction: B	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-design/layout postcard mai (Funds Spent from Federal Account) to support Proposed Term Limits	\$21.59	\$874.61	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/1/2010	Payee Name: United States Postal Service (USPS) Candidate Name: Patrick Finucane City Council Member District 2 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR; postage for mailer, local (Funds Spent from Federal Account) to support Patrick Finucane	\$852.00	\$1,129.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 05/23/2010

through 06/05/2010

CALIFORNIA
FORM 460

Page 23 of 70

NAME OF FILER
 San Diego County Democratic Party (State Acct.)

I.D. NUMBER
 741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/28/2010	Payee Name: Joan Guelden Candidate Name: Toni Atkins State Senator District 76 Jurisdiction: Senate	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-design/layout door hanger (Funds Spent from Federal Account) to support Toni G Atkins	\$75.45	\$347.47	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Payee Name: Joan Guelden Candidate Name: Hon. Howard Wayne City Council Member District 6 Jurisdiction: City of San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-design/layout door hanger (Funds Spent from Federal Account) to support Hon. Howard Wayne	\$75.45	\$29,093.89	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Payee Name: Joan Guelden Candidate Name: Stephen Whitburn County Supervisor District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-design/layout door hanger (Funds Spent from Federal Account) to support Stephen L Whitburn	\$94.32	\$2,042.97	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Payee Name: Joan Guelden Candidate Name: Hon. Sheila Jackson Board of Supervisors District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-design/layout door janger (Funds Spent from Federal Account) to support Hon. Sheila L Jackson	\$94.32	\$2,042.97	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 05/23/2010

through 06/05/2010

CALIFORNIA
FORM 460

Page 24 of 70

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/28/2010	Payee Name: Joan Guelden Candidate Name: Juan Del Rio Board of Supervisors District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-design/layout door hanger (Funds Spent from Federal Account) to support Juan M Del Rio	\$94.32	\$2,042.97	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Payee Name: Joan Guelden Candidate Name: Margaret Moody County Supervisor District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-design & layout door hange (Funds Spent from Federal Account) to support Margaret A Moody	\$94.32	\$2,042.97	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Payee Name: Joan Guelden Candidate Name: Ron Roberts County Supervisor District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-design/layout door hanger (Funds Spent from Federal Account) to oppose Ron Roberts	\$28.30	\$25,395.99	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
5/28/2010	Joan Guelden Proposed Term Limits Ballot Number or Letter: B Jurisdiction: B	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-design/layout door hanger (Funds Spent from Federal Account) to support Proposed Term Limits	\$66.02	\$874.61	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 05/23/2010

through 06/05/2010

CALIFORNIA
FORM 460

Page 25 of 70

NAME OF FILER
 San Diego County Democratic Party (State Acct.)

I.D. NUMBER
 741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
6/1/2010	Payee Name: Johnny De La Cruz Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Canvassing for local candidate (Funds Spent from Federal Account) to support Humberto Peraza	\$180.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/1/2010	Payee Name: Henry Manes Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-canvassing for local candi (Funds Spent from Federal Account) to support Humberto Peraza	\$60.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/1/2010	Payee Name: Margarita B Villarreal Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-canvassing for local candi (Funds Spent from Federal Account) to support Humberto Peraza	\$60.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/1/2010	Payee Name: Chelsea Whitman Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-canvassing for local candi (Funds Spent from Federal Account) to support Humberto Peraza	\$60.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	05/23/2010	
through	06/05/2010	Page 26 of 70

NAME OF FILER
 San Diego County Democratic Party (State Acct.)

I.D. NUMBER
 741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
6/1/2010	Payee Name: Kyle M Cohen Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-canvassing for local candi (Funds Spent from Federal Account) to support Humberto Peraza	\$240.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/1/2010	Payee Name: Sebrina Brown Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-canvassing for local candi (Funds Spent from Federal Account) to support Humberto Peraza	\$60.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/1/2010	Payee Name: Steven Browning Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-canvassing for local candi (Funds Spent from Federal Account) to support Humberto Peraza	\$60.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/1/2010	Payee Name: Isreal Acosta Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-canvassing for local candi (Funds Spent from Federal Account) to support Humberto Peraza	\$120.00	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 05/23/2010

through 06/05/2010

**CALIFORNIA
FORM 460**

Page 27 of 70

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/29/2010	Payee Name: Tony Turpin Associates Candidate Name: Cheryl Cox Mayor Jurisdiction: City of Chula Vista	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-print & mail service to oppose Cheryl Cox	\$7,318.86	\$13,960.16	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
6/2/2010	Payee Name: Will Copy & Print Candidate Name: Hon. Howard Wayne City Council Member District 6 Jurisdiction: City of San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-Print post card mailer to support Hon. Howard Wayne	\$2,383.80	\$29,093.89	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/25/2010	DeFrance Printing Public Works Contracts Ballot Number or Letter: G Jurisdiction: G	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Print slate mailers,allocation (Funds Spent from Federal Account) to oppose Public Works Contracts	\$834.48	\$3,695.10	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
5/25/2010	Payee Name: DeFrance Printing Candidate Name: Jerry Brown Governor Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	print slate mailer, allocation (Funds Spent from Federal Account) to support Jerry Brown	\$16.76	\$898.24	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 05/23/2010

through 06/05/2010

CALIFORNIA
FORM 460

Page 28 of 70

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/25/2010	Payee Name: DeFrance Printing Candidate Name: Hon. Mary Salas State Senator District 79 Jurisdiction: Senate	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	print slate mailer, allocation (Funds Spent from Federal Account) to support Hon. Mary Salas	\$16.76	\$231.52	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/25/2010	Payee Name: DeFrance Printing Candidate Name: Marty Block State Assembly Person District 78 Jurisdiction: Assembly District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	print slate mailer, allocation (Funds Spent from Federal Account) to support Marty J Block	\$16.77	\$231.53	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/25/2010	Payee Name: DeFrance Printing Candidate Name: Hon. Benjamin Hueso State Assembly Person District 79 Jurisdiction: Assembly District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	print slate mailer, allocation (Funds Spent from Federal Account) to support Hon. Benjamin Hueso	\$16.77	\$223.52	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/25/2010	Payee Name: DeFrance Printing Candidate Name: Lantz Lewis Superior Court Judge District 14 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	print slate mailer allocation (Funds Spent from Federal Account) to support Lantz Lewis	\$16.76	\$258.51	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 05/23/2010

through 06/05/2010

CALIFORNIA
FORM 460

Page 29 of 70

NAME OF FILER
 San Diego County Democratic Party (State Acct.)

I.D. NUMBER
 741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/25/2010	Payee Name: DeFrance Printing Candidate Name: Robert Longstreth Superior Court Judge District 21 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	print slate mailer allocation (Funds Spent from Federal Account) to support Robert C Longstreth	\$16.77	\$258.52	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/25/2010	Payee Name: DeFrance Printing Candidate Name: Joel Wohlfeil Superior Court Judge District 34 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	print slate mail allocation (Funds Spent from Federal Account) to support Joel R Wohlfeil	\$16.76	\$258.51	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/25/2010	Payee Name: DeFrance Printing Candidate Name: David Butler Assessor Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	print slate mail piece, alloca (Funds Spent from Federal Account) to support David Butler	\$16.77	\$222.80	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/25/2010	Payee Name: DeFrance Printing Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	print slate mail piece, alloca (Funds Spent from Federal Account) to support Humberto Peraza	\$16.76	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 05/23/2010

through 06/05/2010

CALIFORNIA
FORM 460

Page 30 of 70

NAME OF FILER
 San Diego County Democratic Party (State Acct.)

I.D. NUMBER
 741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/25/2010	Payee Name: DeFrance Printing Candidate Name: Steve Castaneda Mayor Jurisdiction: City of Chula Vista	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	print slate mail piece, alloca (Funds Spent from Federal Account) to support Steve Castaneda	\$16.77	\$25,538.14	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/4/2010	Payee Name: Tony Turpin Associates Candidate Name: Steve Castaneda Mayor Jurisdiction: City of Chula Vista	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-print & mail service post card to support Steve Castaneda	\$5,322.58	\$25,538.14	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/4/2010	Payee Name: Tony Turpin Associates Candidate Name: Cheryl Cox Mayor Jurisdiction: City of Chula Vista	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-print & mail service for post to oppose Cheryl Cox	\$5,322.58	\$13,960.16	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
6/4/2010	Payee Name: CJ Communications Candidate Name: Hon. Howard Wayne City Council Member District 6 Jurisdiction: City of San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-cricket phones & service f (Funds Spent from Federal Account) to support Hon. Howard Wayne	\$376.15	\$29,093.89	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 05/23/2010

through 06/05/2010

**CALIFORNIA
FORM 460**

Page 31 of 70

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
6/3/2010	Payee Name: Progressive Strategy Partners, Inc. Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-design, print and postage (Funds Spent from Federal Account) to support Humberto Peraza	\$3,431.31	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/3/2010	Payee Name: Progressive Strategy Partners, Inc. Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-design, print, mail servic (Funds Spent from Federal Account) to support Humberto Peraza	\$5,017.37	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/5/2010	Payee Name: Rollin Bush Candidate Name: Steve Castaneda Mayor Jurisdiction: City of Chula Vista	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-mail piece design allocati (Funds Spent from Federal Account) to support Steve Castaneda	\$100.00	\$25,538.14	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/5/2010	Payee Name: Rollin Bush Candidate Name: Steve Castaneda Mayor Jurisdiction: City of Chula Vista	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-design mailers to support Steve Castaneda	\$375.00	\$25,538.14	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 05/23/2010

through 06/05/2010

**CALIFORNIA
FORM 460**

Page 32 of 70

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
6/5/2010	Payee Name: Rollin Bush Candidate Name: Cheryl Cox Mayor Jurisdiction: City of Chula Vista	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-design mailers to oppose Cheryl Cox	\$225.00	\$13,960.16	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
6/5/2010	Payee Name: Tony Turpin Associates Candidate Name: Steve Castaneda Mayor Jurisdiction: City of Chula Vista	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-Printing & mailing/shipping se to support Steve Castaneda	\$4,409.68	\$25,538.14	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/3/2010	United States Postal Service (USPS) Public Works Contracts Ballot Number or Letter: G Jurisdiction: G	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	allocated postage for mailer-1 (Funds Spent from Federal Account) to oppose Public Works Contracts	\$45.85	\$3,695.10	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
6/3/2010	Payee Name: United States Postal Service (USPS) Candidate Name: Jerry Brown Governor Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	allocated postage for state ca (Funds Spent from Federal Account) to support Jerry Brown	\$35.93	\$898.24	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	05/23/2010	
through	06/05/2010	Page <u>33</u> of <u>70</u>

NAME OF FILER
 San Diego County Democratic Party (State Acct.)

I.D. NUMBER
 741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
6/3/2010	Payee Name: United States Postal Service (USPS) Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	postage for local candidate ma (Funds Spent from Federal Account) to support Humberto Peraza	\$35.93	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/5/2010	Print Logistics Public Works Contracts Ballot Number or Letter: G Jurisdiction: G	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-print slate handout alloca (Funds Spent from Federal Account) to oppose Public Works Contracts	\$836.05	\$3,695.10	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
6/5/2010	Payee Name: Print Logistics Candidate Name: Jerry Brown Governor Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-print slate piece, allocat (Funds Spent from Federal Account) to support Jerry Brown	\$111.48	\$898.24	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/5/2010	Payee Name: Print Logistics Candidate Name: Hon. Mary Salas State Senator District 79 Jurisdiction: Senate	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-print slate piece,allocati (Funds Spent from Federal Account) to support Hon. Mary Salas	\$111.48	\$231.52	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 05/23/2010

through 06/05/2010

CALIFORNIA
FORM 460

Page 34 of 70

NAME OF FILER
 San Diego County Democratic Party (State Acct.)

I.D. NUMBER
 741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
6/5/2010	Payee Name: Print Logistics Candidate Name: Marty Block State Assembly Person District 78 Jurisdiction: Assembly District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-print slate piece, allocat (Funds Spent from Federal Account) to support Marty J Block	\$111.48	\$231.53	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/5/2010	Payee Name: Print Logistics Candidate Name: Hon. Benjamin Hueso State Assembly Person District 79 Jurisdiction: Assembly District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-print slate piece, allocat (Funds Spent from Federal Account) to support Hon. Benjamin Hueso	\$111.47	\$223.52	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/5/2010	Payee Name: Print Logistics Candidate Name: Lantz Lewis Superior Court Judge District 14 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-print slate mailer, alloca (Funds Spent from Federal Account) to support Lantz Lewis	\$111.47	\$258.51	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/5/2010	Payee Name: Print Logistics Candidate Name: Robert Longstreth Superior Court Judge District 21 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-print slate piece, allocat (Funds Spent from Federal Account) to support Robert C Longstreth	\$111.47	\$258.52	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 05/23/2010

through 06/05/2010

CALIFORNIA
FORM 460

Page 35 of 70

NAME OF FILER
 San Diego County Democratic Party (State Acct.)

I.D. NUMBER
 741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
6/5/2010	Payee Name: Print Logistics Candidate Name: Joel Wohlfeil Superior Court Judge District 34 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-print slate piece, allocat (Funds Spent from Federal Account) to support Joel R Wohlfeil	\$111.47	\$258.51	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/5/2010	Payee Name: Print Logistics Candidate Name: David Butler Assessor Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-print slate piece, allocat (Funds Spent from Federal Account) to support David Butler	\$111.47	\$222.80	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/5/2010	Payee Name: Print Logistics Candidate Name: Steve Castaneda Mayor Jurisdiction: City of Chula Vista	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	print slate piece, allocation (Funds Spent from Federal Account) to support Steve Castaneda	\$111.47	\$25,538.14	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/5/2010	Payee Name: Print Logistics Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-print slate piece, allocat (Funds Spent from Federal Account) to support Humberto Peraza	\$111.47	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	05/23/2010	
through	06/05/2010	Page 36 of 70

NAME OF FILER
 San Diego County Democratic Party (State Acct.)

I.D. NUMBER
 741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
6/1/2010	Payee Name: Political Data, Inc. Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-mail files for local candi (Funds Spent from Federal Account) to support Humberto Peraza	\$897.92	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/1/2010	Payee Name: Eye/Comm, Inc. Candidate Name: Hon. Sheila Jackson Board of Supervisors District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-Mail service for mailer al (Funds Spent from Federal Account) to support Hon. Sheila L Jackson	\$297.32	\$2,042.97	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/1/2010	Payee Name: Eye/Comm, Inc. Candidate Name: Juan Del Rio Board of Supervisors District 4 Jurisdiction: San Diegp	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	mail service for mail piece al (Funds Spent from Federal Account) to support Juan M Del Rio	\$297.32	\$2,042.97	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
6/1/2010	Payee Name: Eye/Comm, Inc. Candidate Name: Margaret Moody County Supervisor District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	mail service allocation-no Fed (Funds Spent from Federal Account) to support Margaret A Moody	\$297.32	\$2,042.97	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 05/23/2010

through 06/05/2010

CALIFORNIA
FORM 460

Page 37 of 70

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
6/1/2010	Payee Name: Eye/Comm, Inc. Candidate Name: Ron Roberts County Supervisor District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-mail service for mail piec (Funds Spent from Federal Account) to oppose Ron Roberts	\$1,281.37	\$25,395.99	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
6/1/2010	Eye/Comm, Inc. Proposed Term Limits Ballot Number or Letter: B Jurisdiction: B	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	mail service for mail piece al (Funds Spent from Federal Account) to support Proposed Term Limits	\$86.97	\$874.61	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Payee Name: Eye/Comm, Inc. Candidate Name: Stephen Whitburn County Supervisor District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-mail service allocation, n (Funds Spent from Federal Account) to support Stephen L Whitburn	\$300.38	\$2,042.97	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Payee Name: Eye/Comm, Inc. Candidate Name: Hon. Sheila Jackson Board of Supervisors District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-mail service allocation, n (Funds Spent from Federal Account) to support Hon. Sheila L Jackson	\$300.38	\$2,042.97	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 05/23/2010

through 06/05/2010

**CALIFORNIA
FORM 460**

Page 38 of 70

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/28/2010	Payee Name: Eye/Comm, Inc. Candidate Name: Juan Del Rio Board of Supervisors District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-mail service for mail piec (Funds Spent from Federal Account) to support Juan M Del Rio	\$300.38	\$2,042.97	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Payee Name: Eye/Comm, Inc. Candidate Name: Margaret Moody County Supervisor District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-mail service for mailer al (Funds Spent from Federal Account) to support Margaret A Moody	\$300.38	\$2,042.97	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Payee Name: Eye/Comm, Inc. Candidate Name: Ron Roberts County Supervisor District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR, mail service for mailer a (Funds Spent from Federal Account) to oppose Ron Roberts	\$1,294.53	\$25,395.99	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
5/28/2010	Eye/Comm, Inc. Proposed Term Limits Ballot Number or Letter: B Jurisdiction: B	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR; mail service allocation, (Funds Spent from Federal Account) to support Proposed Term Limits	\$87.85	\$874.61	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 05/23/2010

through 06/05/2010

**CALIFORNIA
FORM 460**

Page 39 of 70

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/28/2010	Payee Name: Eye/Comm, Inc. Candidate Name: Stephen Whitburn County Supervisor District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	MBR: mail service allocation, (Funds Spent from Federal Account) to support Stephen L Whitburn	\$152.84	\$2,042.97	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Payee Name: Eye/Comm, Inc. Candidate Name: Hon. Sheila Jackson Board of Supervisors District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-mail service allocation, n (Funds Spent from Federal Account) to support Hon. Sheila L Jackson	\$152.84	\$2,042.97	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Payee Name: Eye/Comm, Inc. Candidate Name: Juan Del Rio Board of Supervisors District 4 Jurisdiction: San Diegp	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR mail service allocation, n (Funds Spent from Federal Account) to support Juan M Del Rio	\$152.84	\$2,042.97	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Payee Name: Eye/Comm, Inc. Candidate Name: Margaret Moody County Supervisor District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-mail service allocation, n (Funds Spent from Federal Account) to support Margaret A Moody	\$152.84	\$2,042.97	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 05/23/2010

through 06/05/2010

CALIFORNIA
FORM 460

Page 40 of 70

NAME OF FILER
 San Diego County Democratic Party (State Acct.)

I.D. NUMBER
 741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/28/2010	Payee Name: Eye/Comm, Inc. Candidate Name: Ron Roberts County Supervisor District 4 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	MBR:mail service allocation, n (Funds Spent from Federal Account) to oppose Ron Roberts	\$428.17	\$25,395.99	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
5/28/2010	Eye/Comm, Inc. Proposed Term Limits Ballot Number or Letter: B Jurisdiction: B	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-mail service allocation, n (Funds Spent from Federal Account) to support Proposed Term Limits	\$61.14	\$874.61	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Payee Name: Eye/Comm, Inc. Candidate Name: Jerry Brown Governor Jurisdiction: Statewide	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	mail service-allocation slate (Funds Spent from Federal Account) to support Jerry Brown	\$21.56	\$898.24	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Payee Name: Eye/Comm, Inc. Candidate Name: Hon. Mary Salas State Senator District 79 Jurisdiction: Senate	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	mail service allocation for sl (Funds Spent from Federal Account) to support Hon. Mary Salas	\$21.56	\$231.52	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 05/23/2010

through 06/05/2010

CALIFORNIA
FORM 460

Page 41 of 70

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/28/2010	Payee Name: Eye/Comm, Inc. Candidate Name: Marty Block State Assembly Person District 78 Jurisdiction: Assembly District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	mail service allocation for sl (Funds Spent from Federal Account) to support Marty J Block	\$21.56	\$231.53	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Payee Name: Eye/Comm, Inc. Candidate Name: Hon. Benjamin Hueso State Assembly Person District 79 Jurisdiction: Assembly District	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	mail service allocation for sl (Funds Spent from Federal Account) to support Hon. Benjamin Hueso	\$21.56	\$223.52	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Payee Name: Eye/Comm, Inc. Candidate Name: Lantz Lewis Superior Court Judge District 14 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	mail service allocation for sl (Funds Spent from Federal Account) to support Lantz Lewis	\$21.56	\$258.51	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Payee Name: Eye/Comm, Inc. Candidate Name: Robert Longstreth Superior Court Judge District 21 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	mail service allocation for sl (Funds Spent from Federal Account) to support Robert C Longstreth	\$21.56	\$258.52	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 05/23/2010

through 06/05/2010

CALIFORNIA
FORM 460

Page 42 of 70

NAME OF FILER
 San Diego County Democratic Party (State Acct.)

I.D. NUMBER
 741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/28/2010	Payee Name: Eye/Comm, Inc. Candidate Name: Joel Wohlfeil Superior Court Judge District 34 Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	MBR; mail service allocation (Funds Spent from Federal Account) to support Joel R Wohlfeil	\$21.56	\$258.51	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Payee Name: Eye/Comm, Inc. Candidate Name: David Butler Assessor Jurisdiction: San Diego	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-mail service allocation fo (Funds Spent from Federal Account) to support David Butler	\$21.56	\$222.80	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Payee Name: Eye/Comm, Inc. Candidate Name: Steve Castaneda Mayor Jurisdiction: City of Chula Vista	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-mail service allocation fo (Funds Spent from Federal Account) to support Steve Castaneda	\$21.56	\$25,538.14	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
5/28/2010	Payee Name: Eye/Comm, Inc. Candidate Name: Humberto Peraza City Council Member District 2 Jurisdiction: Chula Vista, CA	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	mail service allocation for sl (Funds Spent from Federal Account) to support Humberto Peraza	\$21.56	\$35,556.21	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 05/23/2010

through 06/05/2010

**CALIFORNIA
FORM 460**

Page 43 of 70

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/28/2010	Eye/Comm, Inc. Public Works Contracts Ballot Number or Letter: G Jurisdiction: G	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	MBR-mail service allocation sl (Funds Spent from Federal Account) to oppose Public Works Contracts	\$1,098.55	\$3,695.10	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL \$73,049.13						

Schedule E Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period from 05/23/2010 through 06/05/2010	CALIFORNIA FORM 460
Page 44 of 70	I.D. NUMBER 741906

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Uybungco Grafix & Signs Chula Vista, CA 91910-1804			club banner	\$108.00
Will Copy & Print San Diego, CA 92101-1254	MBR		MBR-printing mail piece to oppose Ron Roberts	\$3,071.00
Tony Turpin Associates San Diego, CA 92116-2322	MBR		printing/mail service for mail piece allocation to support Steve Castaneda	\$4,391.32

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$54,687.82
2. Unitemized payments made this period of under \$100.	\$27.65
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$0.00
4. Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$54,715.47

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 05/23/2010		
through 06/05/2010		Page 45 of 70
NAME OF FILER San Diego County Democratic Party (State Acct.)		I.D. NUMBER 741906

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Post Haste Mailing Services, Inc. Poway, CA 92064-6882	MBR		Mail service & postage for mailer to support Howard Wayne	\$2,585.00
Joan Guelden Sacramento, CA 95816-5416	MBR		Design mailer to oppose Ron Roberts	\$675.00
Anne W Kearns Fort Myers, FL 33912-7331	MBR		Design postcard mailer to support Howard Wayne	\$500.00
Tony Turpin Associates San Diego, CA 92116-2322	MBR		print & mail service to oppose Cheryl Cox	\$7,318.86
Will Copy & Print San Diego, CA 92101-1254	MBR		Print post card mailer to support Howard Wayne	\$2,383.80

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 05/23/2010		
through 06/05/2010		Page 46 of 70
NAME OF FILER San Diego County Democratic Party (State Acct.)		I.D. NUMBER 741906

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Tony Turpin Associates San Diego, CA 92116-2322	MBR		print & mail service post card mailer to support Steve Castaneda	\$5,322.58
Tony Turpin Associates San Diego, CA 92116-2322	MBR		print & mail service for post card mailer to oppose Cheryl Cox	\$5,322.58
Rollin Bush San Diego, CA 92103-5837	MBR		design mailers to support Steve Castaneda	\$375.00
Rollin Bush San Diego, CA 92103-5837	MBR		design mailers to oppose Cheryl Cox	\$225.00
Tony Turpin Associates San Diego, CA 92116-2322	MBR		Printing & mailing/shipping services for mail piece to support Steve Castaneda	\$4,409.68

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 05/23/2010		
through 06/05/2010		Page 47 of 70
NAME OF FILER San Diego County Democratic Party (State Acct.)		I.D. NUMBER 741906

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
San Diego County Democratic Party (Fed. Acct.) San Diego, CA 92111-1320	TSF			\$18,000.00
TREASURER Xavier Martinez San Marcos, CA 92078-5095				

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$54,687.82

Schedule F Accrued Expenses (Unpaid Bills)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE F

Statement covers period
from 05/23/2010
through 06/05/2010

CALIFORNIA
FORM 460

Page 48 of 70

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTALS

Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)..... **INCURRED TOTALS** _____
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)..... **PAID TOTALS** _____
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)..... **NET** _____
May be a negative number.

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period
from 05/23/2010
through 06/05/2010

CALIFORNIA
FORM **460**

Page 49 of 70

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Post Haste Mailing Services, Inc.

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
USPS San Diego, CA 92116	MBR		postage for mailer to support Howard Wayne	\$2,100.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$2100.00

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
from	05/23/2010	
through	06/05/2010	Page 50 of 70

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

NAME OF AGENT OR INDEPENDENT CONTRACTOR
San Diego County Democratic Party (Fed. Acct.)

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
CJ Communications San Diego, CA 92111-1601	MBR		MBR-cricket phones & service for local candidate	\$297.16
Eye/Comm, Inc. Santee, CA 92071-5617	MBR		MBR-mailing service-no Federal candidates	\$3,138.17
Eye/Comm, Inc. Santee, CA 92071-5617	MBR		MBR-mail service allocation, no Federal candidates	\$237.30
Eye/Comm, Inc. Santee, CA 92071-5617	MBR		MBR-mail service allocation, no Federal candidates	\$237.30

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$3909.93

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period
from 05/23/2010
through 06/05/2010

CALIFORNIA
FORM 460

Page 51 of 70

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

NAME OF AGENT OR INDEPENDENT CONTRACTOR
San Diego County Democratic Party (Fed. Acct.)

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Eye/Comm, Inc. Santee, CA 92071-5617	MBR		MBR-mail service for mail piece allocation, no Federal candidate	\$237.30
Eye/Comm, Inc. Santee, CA 92071-5617	MBR		MBR-mail service for mailer allocation, no federal candidate	\$237.30
Eye/Comm, Inc. Santee, CA 92071-5617	MBR		MBR, mail service for mailer allocation, no Federal candidate	\$1,022.68
Eye/Comm, Inc. Santee, CA 92071-5617	MBR		MBR: mail service allocation, no Federal candidate	\$120.74

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$1618.02

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
from	05/23/2010	
through	06/05/2010	Page 52 of 70

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

NAME OF AGENT OR INDEPENDENT CONTRACTOR
San Diego County Democratic Party (Fed. Acct.)

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Eye/Comm, Inc. Santee, CA 92071-5617	MBR		MBR-mail service allocation, no Federal candidates	\$120.74
Eye/Comm, Inc. Santee, CA 92071-5617	MBR		MBR mail service allocation, no Federal candidate	\$120.74
Eye/Comm, Inc. Santee, CA 92071-5617	MBR		MBR-mail service allocation, no Federal candidate	\$120.74
Eye/Comm, Inc. Santee, CA 92071-5617	MBR		MBR:mail service allocation, no Federal candidate	\$338.25

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$700.47

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
from	05/23/2010	
through	06/05/2010	Page 53 of 70

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

NAME OF AGENT OR INDEPENDENT CONTRACTOR
San Diego County Democratic Party (Fed. Acct.)

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Eye/Comm, Inc. Santee, CA 92071-5617	MBR		MBR mail service generic allocation, no Federal candidates	\$773.28
Eye/Comm, Inc. Santee, CA 92071-5617	MBR		MBR-mail service for mailer allocation-no Federal candidate	\$234.88
Eye/Comm, Inc. Santee, CA 92071-5617	MBR		MBR-Mail service for mailer allocation-no Federal candidate	\$234.88
Eye/Comm, Inc. Santee, CA 92071-5617	MBR		mail service for mail piece allocation-no Federal candidate	\$234.88

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$1477.92

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
from	05/23/2010	
through	06/05/2010	Page 54 of 70

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

NAME OF AGENT OR INDEPENDENT CONTRACTOR
San Diego County Democratic Party (Fed. Acct.)

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Eye/Comm, Inc. Santee, CA 92071-5617	MBR		mail service allocation-no Federal candidate	\$234.88
Eye/Comm, Inc. Santee, CA 92071-5617	MBR		MBR-mail service for mail piece allocation-no Federal candidate	\$1,012.28
Kelly Paper San Diego, CA 92111-1026	MBR		MBR paper for mailer-no Federal candidates	\$201.45
Martinez & Associates, Inc. San Marcos, CA 92078-2463	PRO		acct & reporting service	\$1,007.25

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$2455.86

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
from	05/23/2010	
through	06/05/2010	Page 55 of 70

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

NAME OF AGENT OR INDEPENDENT CONTRACTOR
San Diego County Democratic Party (Fed. Acct.)

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Progressive Strategy Partners, Inc. Los Angeles, CA 90041-1900	MBR		MBR-design, print and postage mail piece for local candidate	\$2,710.73
Progressive Strategy Partners, Inc. Los Angeles, CA 90041-1900	MBR		MBR-design, print, mail service-mailer for local candidate	\$3,963.72
Seaside Printing Company, Inc. Long Beach, CA 90802-1831	MBR		printing mail piece for local candidate	\$718.55
Seaside Printing Company, Inc. Long Beach, CA 90802-1831	MBR		printing mailer for local candidate	\$912.98

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$8305.98

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
from	05/23/2010	
through	06/05/2010	Page 56 of 70

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

NAME OF AGENT OR INDEPENDENT CONTRACTOR
San Diego County Democratic Party (Fed. Acct.)

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Service Mailers, Inc., Los Angeles, CA 90018-4030	MBR		mail service & postage for mail piece-no Federal candidate	\$1,125.24
Service Mailers, Inc., Los Angeles, CA 90018-4030	MBR		mail service & postage-mailer for local candidate	\$2,176.91
United States Postal Service (USPS) San Diego, CA 92199-0001	MBR		postage for mail piece-no Federal candidates	\$2,419.51
United States Postal Service (USPS) San Diego, CA 92199-0001	MBR		MBR-postage for mail piece-no Federal candidate	\$191.23

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$5912.89

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
from	05/23/2010	
through	06/05/2010	Page 57 of 70

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

NAME OF AGENT OR INDEPENDENT CONTRACTOR
San Diego County Democratic Party (Fed. Acct.)

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
United States Postal Service (USPS) San Diego, CA 92199-0001	MBR		postage for mail piece-no Federal candidates	\$191.23
United States Postal Service (USPS) San Diego, CA 92199-0001	MBR		postage mail piece allocation-no Federal candidate	\$191.23
United States Postal Service (USPS) San Diego, CA 92199-0001	MBR		postage for mailer-no Federal candidate	\$191.23
United States Postal Service (USPS) San Diego, CA 92199-0001	MBR		postage for mailer-no Federal candidates	\$824.13

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$1397.82

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
from	05/23/2010	
through	06/05/2010	Page 58 of 70

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

NAME OF AGENT OR INDEPENDENT CONTRACTOR
San Diego County Democratic Party (Fed. Acct.)

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
United States Postal Service (USPS) San Diego, CA 92199-0001	MBR		postage allocation-no Federal candidates	\$260.21
United States Postal Service (USPS) San Diego, CA 92199-0001	MBR		postage- generic allocation-no candidates	\$594.84
United States Postal Service (USPS) San Diego, CA 92199-0001	MBR		postage for mailer-no Federal candidates	\$191.23
United States Postal Service (USPS) San Diego, CA 92199-0001	MBR		MBR; postage for mailer, local candidate	\$673.08

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$1719.36

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
from	05/23/2010	
through	06/05/2010	Page 59 of 70

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

NAME OF AGENT OR INDEPENDENT CONTRACTOR
San Diego County Democratic Party (Fed. Acct.)

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
United States Postal Service (USPS) San Diego, CA 92199-0001	MBR		Postage for mailer-allocated, no Federal candidates	\$191.23
United States Postal Service (USPS) San Diego, CA 92199-0001	MBR		postage allocation mail piece-no Federal candidates	\$191.23
United States Postal Service (USPS) San Diego, CA 92199-0001	MBR		postage for mailer allocation-no Federal andidates	\$191.23
United States Postal Service (USPS) San Diego, CA 92199-0001	MBR		postage allocation mail piece-no Federal candidate	\$824.13

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$1397.82

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
from	05/23/2010	
through	06/05/2010	Page 60 of 70

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

NAME OF AGENT OR INDEPENDENT CONTRACTOR
San Diego County Democratic Party (Fed. Acct.)

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Whiz Bang, Inc. Santa Monica, CA 90404-4134	MBR		design mail piece for local candidate	\$385.12
Whiz Bang, Inc. Santa Monica, CA 90404-4134	MBR		design mailer for local candidate	\$385.12
Will Copy & Print San Diego, CA 92101-1254	MBR		MBR-printing slate door hanger-allocation, no Federal candidates	\$184.88
Will Copy & Print San Diego, CA 92101-1254	MBR		MBR-printing slate door hangers allocation, no federal candidates	\$184.88

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$1140.00

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
from	05/23/2010	
through	06/05/2010	Page 61 of 70

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

NAME OF AGENT OR INDEPENDENT CONTRACTOR
San Diego County Democratic Party (Fed. Acct.)

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Will Copy & Print San Diego, CA 92101-1254	MBR		MBR-printing slate door hanger allocation, no Federal candidates	\$231.10
Will Copy & Print San Diego, CA 92101-1254	MBR		MBR-printing slate door hanger allocation, no Federal candidates	\$231.10
Will Copy & Print San Diego, CA 92101-1254	MBR		MBR_printing slate door hanger allocation, no Federal candidates	\$231.10
Will Copy & Print San Diego, CA 92101-1254	MBR		MBR-printing slate door hanger allocation, no Federal candidates	\$231.10

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$924.40

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
from	05/23/2010	
through	06/05/2010	Page 62 of 70

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

NAME OF AGENT OR INDEPENDENT CONTRACTOR
San Diego County Democratic Party (Fed. Acct.)

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Will Copy & Print San Diego, CA 92101-1254	MBR		MBR-printing slate door hanger allocation, no Federal candidate	\$161.77
Will Copy & Print San Diego, CA 92101-1254	MBR		MBR-printing slate door hanger, allocation generic portion, no Federal Candidates	\$508.41
Will Copy & Print San Diego, CA 92101-1254	MBR		MBR-print postcard mailers allocation, no Fedeal candidates	\$331.72
Will Copy & Print San Diego, CA 92101-1254	MBR		MBR-print post card mailer allocation, no Federal candidates	\$331.72

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$1333.62

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
from	05/23/2010	
through	06/05/2010	Page 63 of 70

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

NAME OF AGENT OR INDEPENDENT CONTRACTOR
San Diego County Democratic Party (Fed. Acct.)

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Will Copy & Print San Diego, CA 92101-1254	MBR		MBR -print post card mailer allocation, no Federal candidate	\$331.72
Will Copy & Print San Diego, CA 92101-1254	MBR		MBR-print post card mailer allocation,no Federal candidates	\$331.72
Will Copy & Print San Diego, CA 92101-1254	MBR		MBR-print post card mailer allocation-no Federal candidates	\$1,429.61
Brian Asis Long Beach, CA 90803-3262	MBR		production for mail piece for local candidate	\$128.37

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$2221.42

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
from	05/23/2010	
through	06/05/2010	Page 64 of 70

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

NAME OF AGENT OR INDEPENDENT CONTRACTOR
San Diego County Democratic Party (Fed. Acct.)

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Brian Asis Long Beach, CA 90803-3262	MBR		production mailer for local candidate	\$128.37
Joan Guelden Sacramento, CA 95816-5416	MBR		MBR-Design mailer & doorhanger for local candidate	\$251.32
Joan Guelden Sacramento, CA 95816-5416	MBR		MBR-design/layout door hanger allocation, generic portion, no candidate	\$163.92

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$543.61

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period from 05/23/2010 through 06/05/2010	CALIFORNIA FORM 460 Page 65 of 70
--	---

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Tony Turpin Associates

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
OnTrac Shipping Phoenix, AZ 85034-7229	MBR		shipping mail piece to support Steve Castaneda	\$187.50
OnTrac Shipping Phoenix, AZ 85034-7229	MBR		shipping mail piece to oppose Cheryl Cox	\$312.50
OnTrac Shipping Phoenix, AZ 85034-7229	MBR		shipping post card mailer to support Steve Castaneda	\$250.00
OnTrac Shipping Phoenix, AZ 85034-7229	MBR		shipping post card mailer to oppose Cheryl Cox	\$250.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$1000.00

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
from	05/23/2010	
through	06/05/2010	Page 66 of 70

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Tony Turpin Associates

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
OnTrac Shipping Phoenix, AZ 85034-7229	MBR		shipping mail piece to support Steve Castaneda	\$100.00
Pacific Standard Press San Diego, CA 92116-2322	MBR		printing & mailing mail piece to support Steve Castaneda	\$3,266.32
Pacific Standard Press San Diego, CA 92116-2322	MBR		printing mail piece to oppose Cheryl Cox	\$2,735.00
Pacific Standard Press San Diego, CA 92116-2322	MBR		print post card mailer to support Steve Castaneda	\$2,058.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$8159.32

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
from	05/23/2010	
through	06/05/2010	Page 67 of 70

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Tony Turpin Associates

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Pacific Standard Press San Diego, CA 92116-2322	MBR		print post card mailer to oppose Cheryl Cox	\$2,058.00
Pacific Standard Press San Diego, CA 92116-2322	MBR		printing mailer to support Steve Castaneda	\$2,711.88
United States Postal Service (USPS) San Diego, CA 92199-0001	MBR		postage to oppose Cheryl Cox	\$2,708.86
United States Postal Service (USPS) San Diego, CA 92199-0001	MBR		Postage post card mailer to support Steve Castaneda	\$2,014.58

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$9493.32

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
from	05/23/2010	
through	06/05/2010	Page 68 of 70

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Tony Turpin Associates

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
United States Postal Service (USPS) San Diego, CA 92199-0001	MBR		postage for post card mailer to oppose Cheryl Cox	\$2,014.58
United States Postal Service (USPS) San Diego, CA 92199-0001	MBR		postage for mail piece to support Steve Castaneda	\$1,097.50

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$3112.08

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule H – Loans Made to Others*

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE H

Statement covers period from 05/23/2010 through 06/05/2010	CALIFORNIA FORM 460
	Page 69 of 70

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		_____% RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	
				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		_____% RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	
*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E.		SUBTOTALS						

(Enter (e) on
Schedule I, Line 3)

Schedule H Summary

- Loans made this period
(Total Column (b) plus unitemized loans less than \$100.)
- Payments received on loans
(Total Column (c) plus unitemized payments less than \$100.)
- Net change this period. (Subtract Line 2 from Line 1.)
(Enter the net here and on the Summary Page, Column A, Line 7.)

NET (May be a negative number)

** If Required

Schedule I

Miscellaneous Increases to Cash

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE I

Statement covers period		CALIFORNIA FORM 460
from	05/23/2010	
through	06/05/2010	Page 70 of 70

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party (State Acct.)

I.D. NUMBER
741906

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$0.00

Schedule I Summary

- Increases to cash of \$100 or more this period..... \$0.00
- Unitemized increases to cash under \$100 this period..... \$0.00
- Total of all interest received this period on loans made to others. (Schedule H, Column (e).)..... \$0.00
- Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)..... **TOTAL** \$0.00

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC